



NATIONAL ASSOCIATION OF  
CHAIN DRUG STORES

November 22, 2013

Via email: [info@hmprg.org](mailto:info@hmprg.org)

Julie Hamos  
Director  
Illinois Department of Healthcare and Family Services  
C/O Health and Medicine Policy Research Group

**Re: Comments on Path to Transformation Medicaid Waiver**

Dear Director Hamos and the Health and Medicine Policy Research Group:

On behalf of the approximately 1,834 chain pharmacies operating in the State of Illinois, the National Association of Chain Drug Stores (NACDS) appreciates the opportunity to submit comments to the Illinois Department of Healthcare and Family Services regarding its concept paper for an 1115 waiver for Illinois Medicaid, entitled Path to Transformation. In particular, we would like to encourage Illinois to consider the role of pharmacy in the following three Path to Transformation pathways: Delivery System Transformation, Build Capacity of the Health Care System for Population Health Management and 21<sup>st</sup> Century Health Care Workforce.

**Delivery System Transformation-Implement and Expand Innovative Managed Care Models**

The delivery system transformation pathway, in part, focuses on new provider-driven models of care, including Coordinated Care Entities, Accountable Care Entities and Patient-Centered Medical Homes. As Illinois moves away from a fee-for-service

system, we encourage the state to consider how pharmacists can play a valuable, cost-effective role by promoting medication adherence within these new delivery systems.

Coordinated care models can improve patient care by promoting safe and effective medication use and achieve optimal patient outcomes through a facilitated partnership among health care providers. Through coordinated efforts with other health care providers, community pharmacists play an important role in ensuring patients take their medications as prescribed. This will improve health outcomes and reduce the use of more costly medical interventions such as hospitalizations and emergency room visits.

Community pharmacies are the face of neighborhood health care. The innovative programs of chain pharmacies deliver unsurpassed value - improving health and wellness and reducing health care costs. Through face-to-face counseling, the pharmacist-patient relationship helps people take medications correctly. This improved medication adherence means a higher quality of life, and the prevention of costly treatments. Accordingly, Illinois should incorporate pharmacists within its planned coordinated care models, particularly within the area of medication adherence.

#### **Build Capacity of the Health Care System for Population Health Management-Wellness Strategies**

Through wellness strategies, Illinois plans to invest in evidence-based prevention and wellness-focused strategies for Medicaid clients, such as tobacco cessation, obesity prevention, nutrition counseling and diabetes self-management, among others. As Illinois considers options for investing in wellness strategies, we encourage the State to

invest in pharmacy as a provider of each of these listed services. In particular, we encourage Illinois to invest in pharmacists as Medication Therapy Management (MTM) providers through a robust Medicaid MTM program.

MTM focuses on patients with chronic conditions that require maintenance medications, such as hypertension or high cholesterol. MTM services are usually targeted to those patients with disease states that are most prevalent in a specific population. Patients are targeted based on their medication history and compliance to the prescribed regimen and their frequency of hospitalizations, emergency room visits, and doctor's visits. In the community-based setting, MTM services are conducted by a licensed pharmacist in partnership with the patient and their primary care provider. MTM services include a broad range of activities designed to improve patient outcomes, identify complex medication-related problems, prevent medication errors, enhance communication between providers and patients, improve communication among providers, and enable patients to be more actively involved in their own medication self-management.

Over the last decade, MTM provided by community pharmacists has gained widespread public attention for achieving improved outcomes in patients with chronic health care issues, while at the same time reducing overall health care costs. In addition to more actively engaging patients in their own health care, implementation of pharmacist-provided MTM can provide significant cost savings to the Illinois Medicaid program. MTM services provided by community pharmacists are an effective tool to

increase medication adherence, improve quality and control overall health care costs, particularly in this period of reduced budgets and economic uncertainty.

Several states have implemented MTM programs and have seen notable program savings for the state and enrolled beneficiaries. For example, the North Carolina CheckMeds program, for Medicare Part D recipients ages 65 and older, has generated savings of approximately \$66.7 million in overall health care costs for the state which included \$35.1 million from avoided hospitalizations, \$8.1 million in drug product cost savings. Similarly, in the first twelve months of implementation, an Iowa MTM pilot program generated savings of approximately \$4.3 million in avoided costs, which consisted of \$1.18 million from drug product costs savings and approximately \$3.07 million from fewer hospitalizations, fewer emergency room visits, and fewer office visits.

Pharmacists already have the training and skills needed to provide MTM services and currently provide most of these services in their day-to-day activities. Accessible in virtually every community, pharmacists are medication experts with the ability to identify patient specific medication-related issues and communicate those issues to the patient and their provider. Accordingly, Illinois should include a pharmacist-provided MTM program as part of its planned Medicaid wellness strategies.

### **21<sup>st</sup> Century Health Care Workforce**

In the Path to Transformation, Illinois seeks to invest in physician extenders to alleviate existing and future healthcare provider shortages within the state. We believe

that pharmacists provide an effective and cost-efficient physician extender resource. As outlined above, pharmacists offer the ability to provide physician extender services in the areas of tobacco cessation, obesity prevention, nutrition counseling, diabetes self-management and MTM. In particular, we want to emphasize the physician-extender benefit offered by collaborative practice agreements between pharmacists and doctors.

Collaborative practice agreements are written agreements between a pharmacist and physician wherein pharmacists work in collaboration with physician(s) to manage patients' drug therapy and related care. Under collaborative practice agreements, pharmacists are generally permitted to modify, continue or discontinue drug therapy in accordance with written guidelines; conduct tests and screenings; and order lab work in accordance with written guidelines or protocols agreed to by physicians in collaborative practice agreements. Physicians have ultimate authority to further delineate the activities that pharmacists may and may not perform in accordance with the law under the collaborative practice agreement.

Collaborative practice agreements improve patient care in a variety of ways. Research has shown that approximately one-third to one-half of all patients in the United States do not take their medication as prescribed by their providers. Collaborative practice agreements have been proven to improve compliance and prevent unnecessary hospitalizations caused by drug misuse.

Collaborative practice agreements also increase patient accessibility to necessary preventive services, as pharmacists are available to intervene to prevent a patient's

condition from worsening. Collaborative practice agreements with community pharmacies -- many of which are open 24-hours a day, seven days a week -- will allow many people to quickly and easily receive the care they need. These agreements also strengthen the pharmacist-physician relationship, ensuring that patients receive the most appropriate and comprehensive drug therapy. Accordingly, we encourage Illinois to invest in Medicaid collaborative practice agreements as part of expanding the role of pharmacists as physician extenders.

### **Conclusion**

We thank you for the opportunity to provide these comments. We hope that Illinois will invest in pharmacists as high quality, cost-effective providers in a changing Medicaid system.

Sincerely,

A handwritten signature in black ink that reads "Joel Kurzman". The signature is written in a cursive, flowing style.

Joel Kurzman

Director, State Government Affairs